

# NEIGHBORHOOD ASSISTANCE PROGRAM TAX SEASON 2014 WEBINAR

Post-Webinar Slide Notes.

Hosted by Evan R. Shearin, Community Programs Analyst  
October 17, 2014

# IHCDA SUMMARY:

The Indiana Housing and Community Development Authority

## OUR VISION FOR INDIANA

An Indiana with a sustainable quality of life for all Hoosiers in the community of their choice.

## OUR MISSION

To provide housing opportunities, promote self-sufficiency, and strengthen communities.

# NAP SUMMARY

The Neighborhood Assistance Program is a program of the State of Indiana that provides \$2.5 million tax credits annually to non-profit organizations for sale as a fundraising and capacity building tool.

NAP is created by Indiana Code 6-1.3-9.

NAP credits are worth 50% of the value of a contribution, and are deducted from a donor's tax liability.

NAP is administered by the Indiana Housing and Community Development Authority.

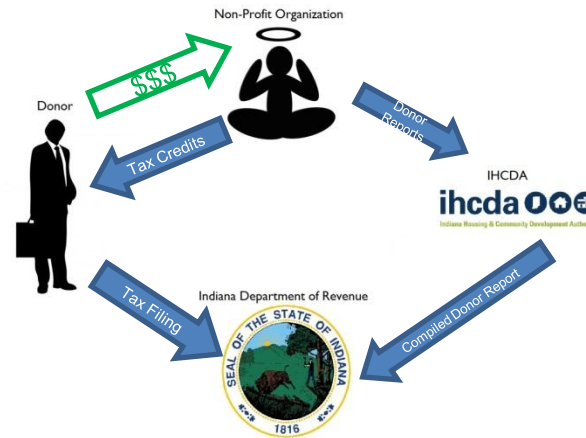
# LEARNING OBJECTIVES:

This webinar will cover the following topics:

- The NAP Process
  - Why reporting is so important
- How to apply for an IHCDa Online account
- How to file reports on IHCDa Online
- How to claim NAP credits on your tax return (for donors)

# The NAP Process

1. Every year, IHCDAs issues \$2.5 million in state tax credits to Indiana non-profit organizations (our partners.)
2. These partners then sell those credits to donors in exchange for contributions.
3. Our partners then report those contributions to IHCDAs in their twice-annual donor reports.
4. IHCDAs compile those reports into a single report which we forward to the Indiana Department of Revenue (DOR.)
5. Beginning in February and throughout the year, Indiana residents (including NAP donors) file their tax returns with DOR
6. DOR compares the donor's tax return with IHCDAs compiled report and, if they match, grants the tax credit.



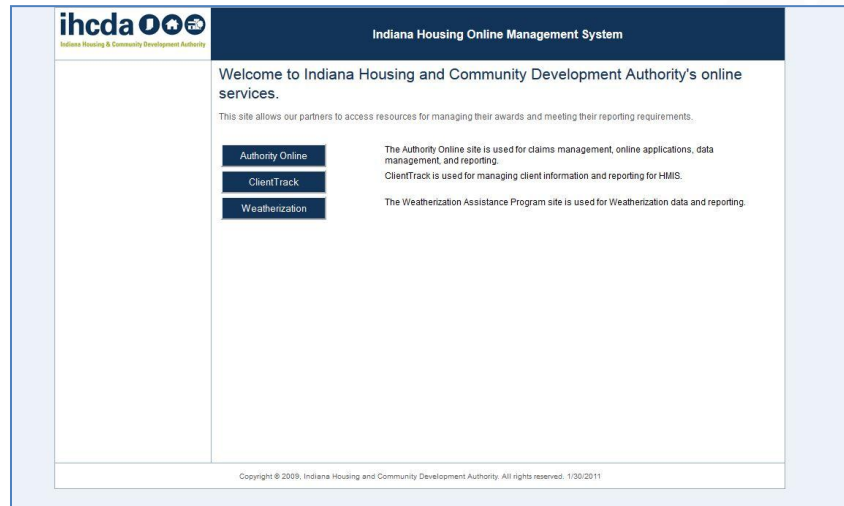
# Donor Reports Quick Facts

- Two donor reports are required per year
  - Donor Report One: Mid-Year Report (due January 9)
  - Donor Report Two: End-of-Year Report (due June 5)\*  
*\*The End of year report is not required if 100% of your credits are sold and reported on the Mid-Year Report*
- The report requires the following information\*:
  - Donor Name
  - Donor Tax ID
  - Donor Address
  - Date of donation
  - Value of donation*\*All of this information is collected on the NC-10 form*
- Reports must be entered by the due date on [www.IHCDAOnline.com](http://www.IHCDAOnline.com)

# IHCDA Online

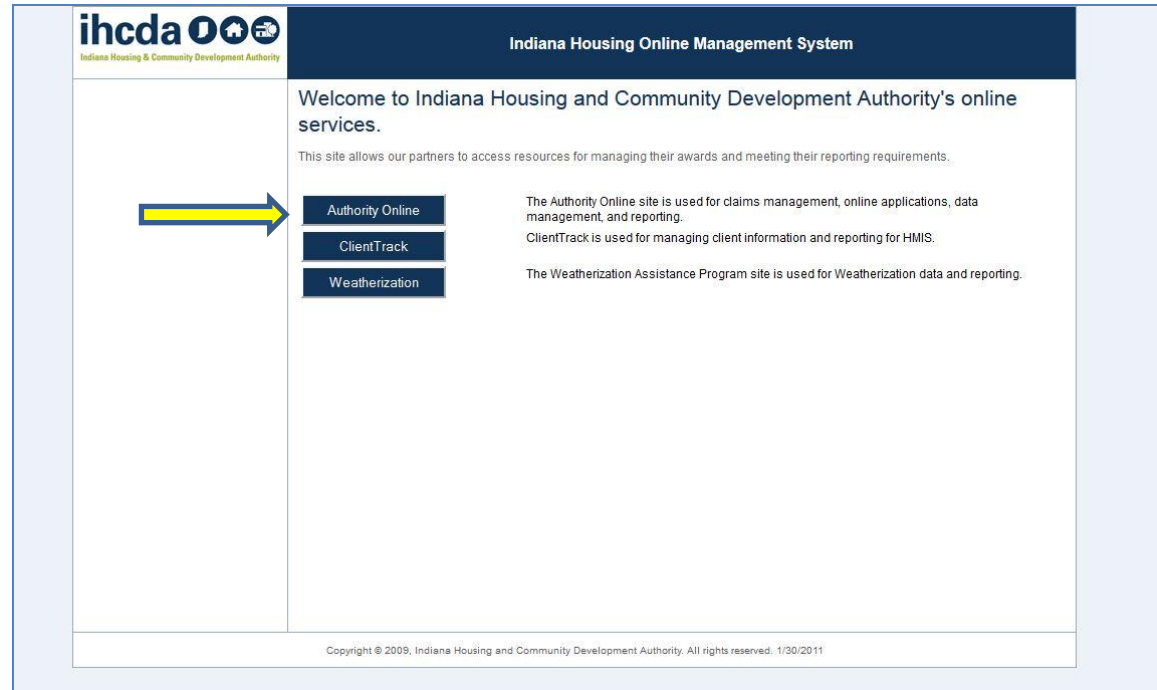
This is the front page of IHCDA Online.

It can be accessed at  
[www.IHCDAOnline.com](http://www.IHCDAOnline.com)



# IHCDA Online

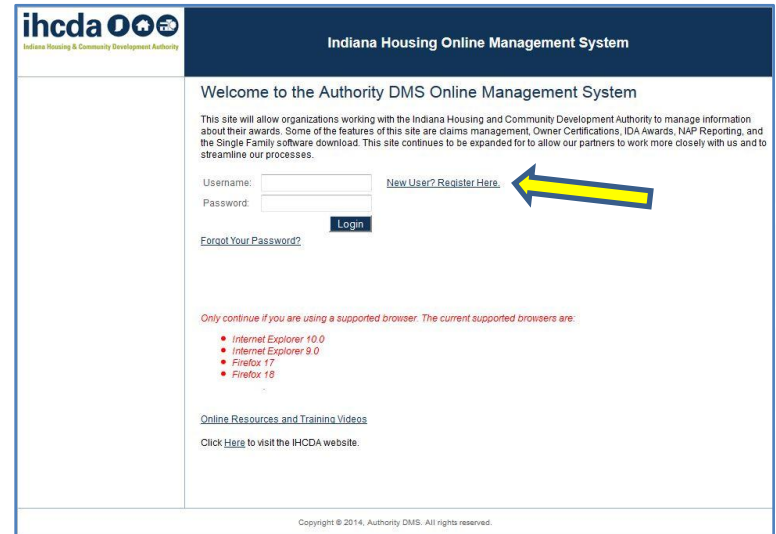
To begin, click the button that reads “Authority Online.”






# IHCDA Online

To create a new account, click the link that reads, “New User? Register Here.”



**ihcda**   
Indiana Housing & Community Development Authority

**Indiana Housing Online Management System**

Welcome to the Authority DMS Online Management System

This site will allow organizations working with the Indiana Housing and Community Development Authority to manage information about their awards. Some of the features of this site are claims management, Owner Certifications, IDA Awards, NAP Reporting, and the Single Family software download. This site continues to be expanded for to allow our partners to work more closely with us and to streamline our processes.

Username:  [New User? Register Here.](#)

Password:  [Forgot Your Password?](#)

Only continue if you are using a supported browser. The current supported browsers are:

- Internet Explorer 10.0
- Internet Explorer 9.0
- Firefox 17
- Firefox 18

[Online Resources and Training Videos](#)

Click [Here](#) to visit the IHCDA website.

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# IHCDA Online

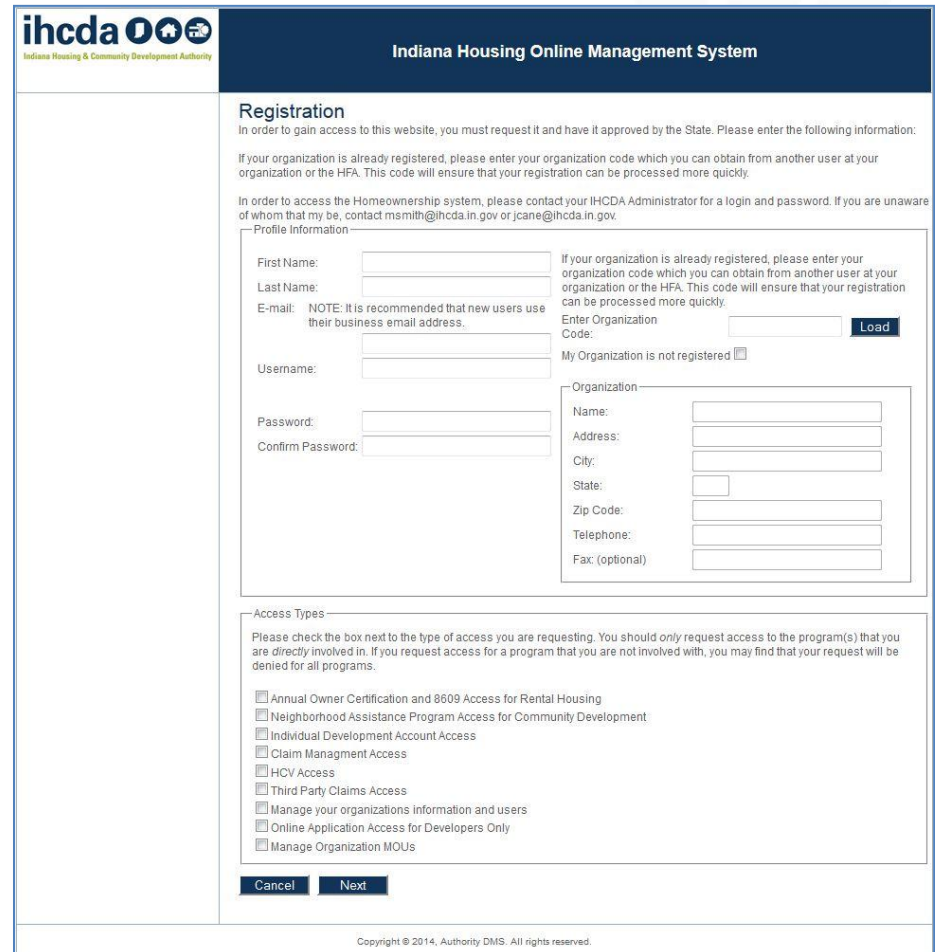
On the registration page, enter the following information:

- First Name
- Last Name
- Email
- A unique username
- A new password
- Confirm that password


Enter your Organization Code.

Finally, under “Access Types,” select “Neighborhood Assistance Program for Community Development.”

Select the button labeled “Next” to continue.



The screenshot shows the 'Registration' page of the Indiana Housing Online Management System. The page header includes the IHCDA logo and the title 'Indiana Housing Online Management System'. The main content area is titled 'Registration' and contains instructions for new users and existing organizations. It includes a 'Profile Information' section with fields for First Name, Last Name, E-mail, Username, Password, and Confirm Password. There is also a section for 'Enter Organization Code' with a 'Load' button. Below this is an 'Organization' section with fields for Name, Address, City, State, Zip Code, Telephone, and Fax (optional). At the bottom, there is an 'Access Types' section with a list of checkboxes for selecting the type of access requested. The 'Next' button is highlighted in blue.

**ihcda**   
Indiana Housing & Community Development Authority

**Indiana Housing Online Management System**

**Registration**  
In order to gain access to this website, you must request it and have it approved by the State. Please enter the following information:

If your organization is already registered, please enter your organization code which you can obtain from another user at your organization or the HFA. This code will ensure that your registration can be processed more quickly.

In order to access the Homeownership system, please contact your IHCDA Administrator for a login and password. If you are unaware of whom that may be, contact [msmith@ihcda.in.gov](mailto:msmith@ihcda.in.gov) or [jcane@ihcda.in.gov](mailto:jcane@ihcda.in.gov).

**Profile Information**

First Name:   
Last Name:   
E-mail:  NOTE: It is recommended that new users use their business email address.  
Username:   
Password:   
Confirm Password:

If your organization is already registered, please enter your organization code which you can obtain from another user at your organization or the HFA. This code will ensure that your registration can be processed more quickly.  
Enter Organization Code:  **Load**  
My Organization is not registered ☐

**Organization**

Name:   
Address:   
City:   
State:   
Zip Code:   
Telephone:   
Fax (optional):

**Access Types**

Please check the box next to the type of access you are requesting. You should only request access to the program(s) that you are directly involved in. If you request access for a program that you are not involved with, you may find that your request will be denied for all programs.

☐ Annual Owner Certification and 8609 Access for Rental Housing  
☐ Neighborhood Assistance Program Access for Community Development  
☐ Individual Development Account Access  
☐ Claim Management Access  
☐ HCV Access  
☐ Third Party Claims Access  
☐ Manage your organizations information and users  
☐ Online Application Access for Developers Only  
☐ Manage Organization MOUs

**Cancel** **Next**

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# IHCDA Online

On the Registration Summary page, please confirm that your information is accurate.

If it is not, click the “Cancel” button to go back and make any necessary changes.

If it is, click the “Submit” button to continue.

The screenshot shows the 'Registration Summary' page of the 'Indiana Housing Online Management System'. The page header includes the IHCDA logo and the system name. The main content area is titled 'Registration Summary' and contains a prompt: 'Please Review the following information before submitting your registration request'. Below this, there are two sections: 'User Information' and 'Organization Details'. The 'User Information' section shows fields for First Name (Evan), Last Name (Shearn), E-mail, and Username, with the last three fields redacted. The 'Organization Details' section shows fields for Organization Code, Name, Address (30 S. Meridian Street), City (Indianapolis), State (IN), Zip Code (46204-3565), Telephone, and Fax, with the last three fields redacted. At the bottom of the form, there is a checkbox for 'Neighborhood Assistance Program Access for Community Development' which is checked, and a 'Yes' button. Below the form are 'Cancel' and 'Submit' buttons. The footer of the page reads 'Copyright © 2014, Authority DMS. All rights reserved.'

# IHCDA Online

A confirmation message will be displayed, when you click “Submit” indicating that your registration has been completed and received.

It can take as long as three business days to activate your account, so please allow for this in your schedule.

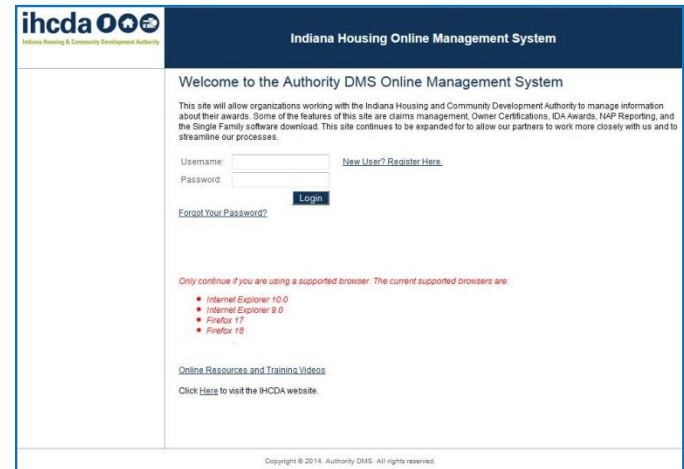
If three business days have elapsed and your account is still not active, please contact the NAP coordinator.



The screenshot shows the 'Registration Summary' page of the 'Indiana Housing Online Management System'. The page header includes the 'ihcda' logo and the text 'Indiana Housing & Community Development Authority'. The main content area is titled 'Registration Summary' and contains a message: 'Please Review the following information before submitting your registration request'. Below this, there are two sections: 'User Information' and 'Organization Details'. The 'User Information' section shows fields for First Name (Evan), Last Name (Shearin), E-mail, and Username, all of which are redacted with black bars. The 'Organization Details' section shows fields for Organization Code, Name, Address (30 S. Meridian Street), City (Indianapolis), State (IN), Zip Code (46204-3566), Telephone, and Fax, all of which are also redacted with black bars. At the bottom of the form, there is a checkbox for 'Neighborhood Assistance Program Access for Community Development' with a 'Yes' option. A 'Return' button is visible, and a message states: 'Your registration information has been submitted and is being processed. An email notification will be sent to you upon approval or denial. Please be aware that your request may take up to 3 business days to be processed.' The footer of the page includes the copyright notice: 'Copyright © 2014. Authority DHS. All rights reserved.'

# Filing Donor Reports

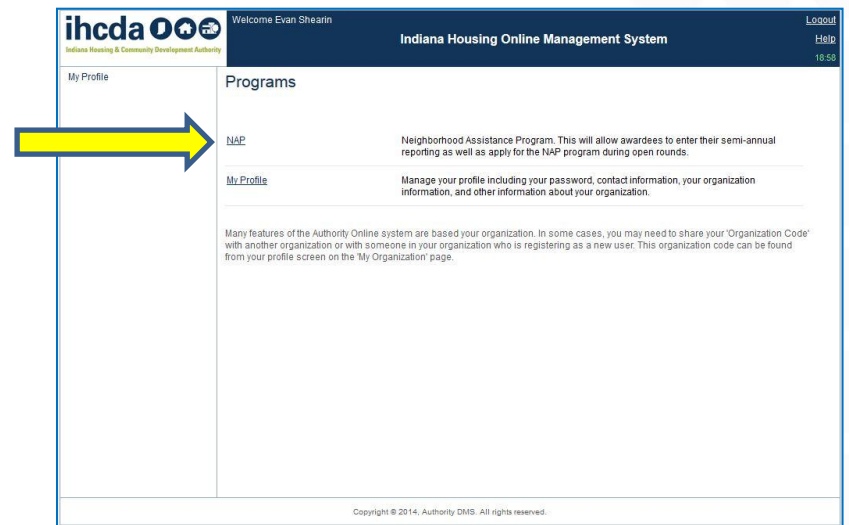
If you do have an IHCDa Online account, please enter your username and password on the login screen. Then click “Login.”



The screenshot shows the login interface for the Indiana Housing Online Management System. The header includes the IHCDa logo and the text "Indiana Housing & Community Development Authority". The main heading is "Indiana Housing Online Management System". Below this, a welcome message states: "Welcome to the Authority DMS Online Management System. This site will allow organizations working with the Indiana Housing and Community Development Authority to manage information about their awards. Some of the features of this site are claims management, Owner Certifications, IDA Awards, NHP Reporting, and the Single Family software download. This site continues to be expanded for to allow our partners to work more closely with us and to streamline our processes." The login section contains fields for "Username:" and "Password:", a "New User? Register Here." link, and a "Login" button. A link for "Forgot Your Password?" is also present. A note specifies supported browsers: "Only continue if you are using a supported browser. The current supported browsers are: Internet Explorer 10.0, Internet Explorer 9.0, Firefox 17, Firefox 18." At the bottom, there are links for "Online Resources and Training Videos" and "Click [here](#) to visit the IHCDa website." The footer contains the copyright notice: "Copyright © 2014, Authority DMS. All rights reserved."

# Filing Donor Reports

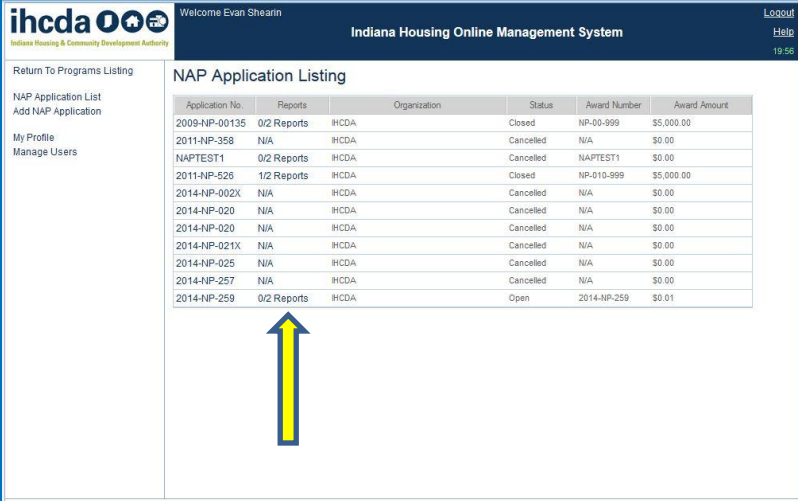
On the “Programs” page, click the link that says, “NAP.”






# Filing Donor Reports

The next page lists every NAP application that your organization has filed. Find the 2014 program with the status “Open.”

Select the link that reads “0/2 Reports.”



ihcda   

Welcome Evan Shearin [Logout](#) [Help](#) 19:56

Indiana Housing & Community Development Authority

[Return To Programs Listing](#)

[NAP Application List](#)  
[Add NAP Application](#)

[My Profile](#)  
[Manage Users](#)

### NAP Application Listing

Application No	Reports	Organization	Status	Award Number	Award Amount
2009-NP-00135	0/2 Reports	ihcda	Closed	NP-00-999	\$5,000.00
2011-NP-358	N/A	ihcda	Cancelled	N/A	\$0.00
NAPTEST1	0/2 Reports	ihcda	Cancelled	NAPTEST1	\$0.00
2011-NP-526	1/2 Reports	ihcda	Closed	NP-010-999	\$5,000.00
2014-NP-002X	N/A	ihcda	Cancelled	N/A	\$0.00
2014-NP-020	N/A	ihcda	Cancelled	N/A	\$0.00
2014-NP-020	N/A	ihcda	Cancelled	N/A	\$0.00
2014-NP-021X	N/A	ihcda	Cancelled	N/A	\$0.00
2014-NP-025	N/A	ihcda	Cancelled	N/A	\$0.00
2014-NP-257	N/A	ihcda	Cancelled	N/A	\$0.00
2014-NP-259	0/2 Reports	ihcda	Open	2014-NP-259	\$0.01

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# Filing Donor Reports

On the Semi-Annual Reporting page, ensure that the option named “For Period” reads “First Half.”

Further down the page, enter your donor’s information. The page asks:

- First name
- Middle Name
- Last name
- Address
- City
- State
- Zip Code
- Contribution Amount
- Contribution Date

**ihcda** Indiana Housing & Community Development Authority

Welcome Evan Shearin

Indiana Housing Online Management System

Logout Help 19/19

Return To Programs Listing  
NAP Application List  
Add NAP Application

My Profile  
Manage Users

### Neighborhood Assistance Program Semi-Annual Reporting

For Award: 2014-NP-259 Report Status: Open  
Award Start Date: 7/1/2014 Award End Date: 6/30/2015  
For Period: **First Half**

#### Award Information

Results for Period	
Name of Organization: IHODA	De-Allocation Benchmark: 50.00 %
Award Number: 2014-NP-259	Percentage of Credits Sold: 0.00 %
Original Award Amount: \$0.01	Total Credits to be De-Allocated: \$0.00
Total To Be De-Allocated: \$0.00	
Total Re-Allocation: \$0.00	
Revised Award Amount: \$0.01	
Credits Sold this Period: \$0.00	
Total Credits Sold: \$0.00	
Remaining Credits to be sold: \$0.01	

#### Add Contributor

Contributor Type\*: **Individual**

First Name\*:  Middle Name:  Last Name\*:

SSN\*:

Address\*:  City\*:  State: **IN** Zip Code\*:

Contribution Amount\*:

Contribution Date\*:

#### Contributors



# Filing Donor Reports

When you've completed your donor's information, select the button labeled "Add Contributor."

Repeat this process for each of your contributors.

**Submit Report**

**Award Information**

Name of Organization: IHCD	
Award Number: 2014-NP-259	
Original Award Amount: \$0.01	
Total To Be DeAllocated: \$0.00	
Total Re-Allocation: \$0.00	
Revised Award Amount: \$0.01	
Credits Sold this Period: \$0.01	
Total Credits Sold: \$0.01	
Remaining Credits to be sold: \$0.00	

Results for Period	
De-Allocation Benchmark:	60.00 %
Percentage of Credits Sold:	100.00 %
Total Credits to be De-Allocated:	\$0.00

**Add Contributor**

Contributor Type:\* **Individual**

First Name:\*  Middle Name:  Last Name:\*

SSN:\*

Address:\*  City:\*  State: **IN** Zip Code:\*

Contribution Amount:\* **\$0.00**

Contribution Date:\*

**Add Contributor**

**Contributors**

**Delete Selected Contributors**

Name	Tax ID #	Date	Amount
Address	City	State	Zip Code
John Q Taxpayer	123-45-6789	10/16/2014	\$0.02
<input checked="" type="checkbox"/> 30 S. Meridian St	Indianapolis	IN	46204

**Delete Selected Contributors**

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# Filing Donor Reports

When you've entered all of your contributors, select the button labeled "Submit Report."

Once you've clicked this button, you cannot edit your report again. You are welcome to save contributors, then return later and enter more, until you select this button.



The screenshot shows the ihcda Indiana Housing & Community Development Authority's online management system. The page is titled "Neighborhood Assistance Program Semi-Annual Reporting". It displays award information for award 2014-NP-259, which is open for reporting. The "Submit Report" button is highlighted with a yellow arrow. Below the award information, there is a section for adding contributors with various input fields for name, address, and contribution details.

**ihcda** Indiana Housing & Community Development Authority

Welcome Evan Shearin

Indiana Housing Online Management System

Logout Help 19:17

Return To Programs Listing

NAP Application List  
Add NAP Application

My Profile  
Manage Users

**Neighborhood Assistance Program Semi-Annual Reporting**

For Award: 2014-NP-259 Report Status: Open  
Award Start Date: 7/1/2014 Award End Date: 6/30/2015  
For Period: First Half

[View Application](#)

**Submit Report**

**Award Information**

Name of Organization: ihcda	<b>Results for Period</b>
Award Number: 2014-NP-259	De-Allocation Benchmark: 60.00 %
Original Award Amount: \$0.01	Percentage of Credits Sold: 100.00 %
Total To Be DeAllocated: \$0.00	Total Credits to be De-Allocated: \$0.00
Total Re-Allocation: \$0.00	
Revised Award Amount: \$0.01	
Credits Sold this Period: \$0.01	
Total Credits Sold: \$0.01	
Remaining Credits to be sold: \$0.00	

**Add Contributor**

Contributor Type: Individual

First Name: Middle Name: Last Name:

SSN:

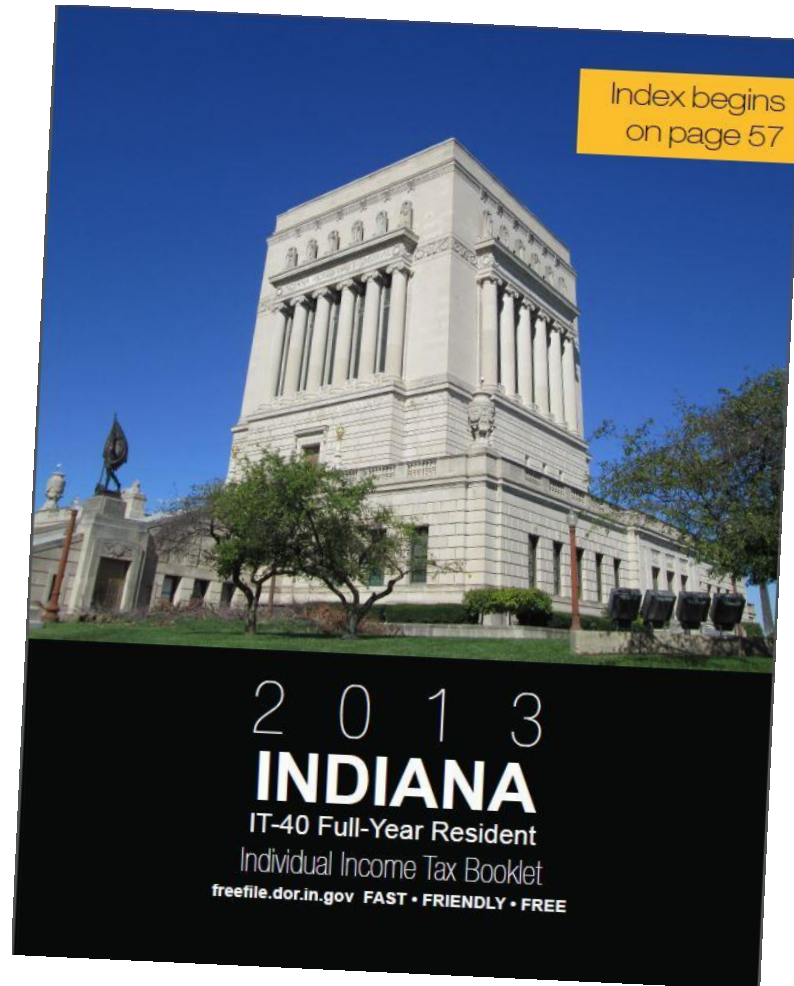
Address: City: State: IN Zip Code:

Contribution Amount: \$0.00

Contribution Date:

**Add Contributor**

# Claiming NAP Credits



# Claiming NAP Credits

IT-40

The image shows the top portion of the 2013 Form IT-40, titled "Indiana Full-Year Resident Individual Income Tax Return". It includes fields for the taxpayer's name, Social Security Number, and marital status. There are also sections for dependent information and a "Round all entries" table at the bottom right.

Schedule 6:  
Offset Credits

The image shows the top portion of Schedule 6, titled "Schedule 6: Offset Credits". It includes sections for "Other Local Credits", "College credit", and "Other Credits". There are also "Round all entries" tables and a "Total Offset Credits" field at the bottom right.

The two forms necessary to claim NAP tax credits are the IT-40 Individual Tax Return Form and the Schedule 6: Offset Credits form.

Both are available in the Indiana Department of Revenue Individual Tax Return Booklet

# Claiming NAP Credits

Begin by filling your IT-40 out normally.

Form  
**IT-40**  
State Form 154  
(R12 / 8-13)

**2013** **Indiana Full-Year Resident Individual Income Tax Return** Due April 15, 2014

If filing for a fiscal year, enter the dates (see instructions) (MM/DD/YYYY):  
from 01 01 2014 to 12 31 2014

Your Social Security Number 123 45 6789 Spouse's Social Security Number 123 45 6789

☐ Place "X" in box if applying for ITIN ☐ Place "X" in box if applying for ITIN

Your first name Initial Last name Suffix  
John Q Taxpayer

If filing a joint return, spouse's first name Initial Last name Suffix  
Jane P Taxpayer-Citizen

Present address (number and street or rural route)  
123 Indiana Lane

City State Zip/Postal code  
Indianapolis IN 46204

Foreign country 2-character code (see pg. 6 ) School corporation number (see pages 55 and 56 )  
5385

Enter below the 2-digit county code numbers (found on the back of Schedule CT-40) for the county where you lived and worked on January 1, 2013.

County where you lived XX County where you worked XX County where spouse lived XX County where spouse worked XX

# Claiming NAP Credits

Stop when you reach line 13.

Form **IT-40**  
State Form 154  
(R12 / 5-13)

**2013** **Indiana Full-Year Resident Individual Income Tax Return** Due April 15, 2014

If filing for a fiscal year, enter the dates (see instructions) (MM/DD/YYYY):  
from 01 01 2014 to 12 31 2014

Your Social Security Number 123 45 6789 Spouse's Social Security Number 123 45 6789

☐ Place "X" in box if applying for ITIN Initial Last name Suffix ☐ Place "X" in box if applying for ITIN

Your first name \_\_\_\_\_  
If filing a joint return \_\_\_\_\_  
Present address \_\_\_\_\_  
City \_\_\_\_\_  
Foreign country \_\_\_\_\_  
Enter below the county where you lived \_\_\_\_\_

12. Enter credits from Schedule 5, line 9 (enclose schedule) 12 .00

13. Enter offset credits from Schedule 6, line 7 (enclose schedule) 13 .00

14. Add lines 12 and 13 **Indiana Credits** 14 .00

15. Enter amount from line 11 **Indiana Taxes** 15 .00

16. If line 14 is equal to or more than line 15, subtract line 15 from line 14 (if smaller, skip to line 23) 16 .00

17. Amount from line 16 to be donated to the Indiana Nongame Wildlife Fund 17 .00

18. Subtract line 17 from line 16 **Overpayment** 18 .00

19. Amount from line 18 to be applied to your 2014 estimated tax account (see instructions on page 10):  
Enter your county code county tax to be applied \$ a .00  
Spouse's county code county tax to be applied \$ b .00  
Indiana adjusted gross income tax to be applied \$ c .00  
Total to be applied to your estimated tax account (a + b + c; cannot be more than line 18) 19d .00

20. Penalty for underpayment of estimated tax from Schedule IT-2210 or IT-2210A (enclose sch.) 20 .00

21. Refund: Line 18 minus lines 19d and 20. Note: If less than zero, see line 23 Your Refund 21 .00

22. Direct Deposit (see page 12)



# Claiming NAP Credits

Begin filling out your Schedule 6: Offset Credits form.

**Schedule 6**  
Form IT-40, State Form 63999  
(05/18-19)

**Schedule 6: Offset Credits**  
Instructions begin on page 40

**2013**

Enclosure  
Sequence No. 05

Name(s) shown on Form IT-40 \_\_\_\_\_ Your Social Security Number \_\_\_\_\_

Round all entries

1. Credit for local taxes paid outside Indiana \_\_\_\_\_ 1 \_\_\_\_\_ 0.00

2. County credit for the elderly: attach federal Schedule R \_\_\_\_\_ 2 \_\_\_\_\_ 0.00

3. Other Local Credits: See instructions (enclose additional sheets if necessary)

a. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ 3a \_\_\_\_\_ 0.00

b. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ 3b \_\_\_\_\_ 0.00

**Important:** Lines 1 through 3 cannot be greater than the county tax due on Form IT-40, line 9 (see Combined Limitation instructions)

4. College credit: attach Schedule CC-40 \_\_\_\_\_ 4 \_\_\_\_\_ 0.00

5. Credit for taxes paid to other states: enclose other state's return \_\_\_\_\_ 5 \_\_\_\_\_ 0.00

6. Other Credits: See instructions (enclose additional sheets if necessary)

a. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ 6a \_\_\_\_\_ 0.00

b. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ 6b \_\_\_\_\_ 0.00

c. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ 6c \_\_\_\_\_ 0.00

d. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ 6d \_\_\_\_\_ 0.00

**Important:** Lines 4 through 6 added together cannot be greater than the state adjusted gross income tax due on Form IT-40, line 8 (see Combined Limitation instructions)

7. Add lines 1 through 6. Enter total here and on line 13 of Form IT-40 **Total Offset Credits** 7 \_\_\_\_\_ 0.00

23213111694

# Claiming NAP Credits

On line 6, enter the following information in the appropriate fields.

- Next to “Enter Credit Name” enter “Neighborhood Assistance.”
- Next to “Code no.” enter “828.”
- In the final box, enter the amount of your NAP credits.  
(50% the value of your contribution.)

6. Other Credits: See instructions (enclose additional sheets if necessary)			
a. Enter credit name	Neighborhood Assistance	code no.	828
			63 1000 .00



# Claiming NAP Credits

**Schedule 6: Offset Credits**  
Form IT-40, Use Form Dates 01/15/15  
Instructions begin on page 40  
2013  
Enclosure Sequence No. 65

Name(s) shown on Form IT-40 \_\_\_\_\_ Your Social Security Number \_\_\_\_\_

Round all entries

1. Credit for local taxes paid outside Indiana \_\_\_\_\_ .00

2. County credit for the elderly attach federal Schedule B \_\_\_\_\_ .00

3. Other Local Credits: (See instructions (enclose additional sheets if necessary))

a. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ .00

b. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ .00

Important: Lines 1 through 3 cannot be greater than the county tax due on Form IT-40, line 9 (see Combined Limitation instructions)

4. College credit attach Schedule CC-40 \_\_\_\_\_ .00

5. Credit for taxes paid to other states: enclose other state's return \_\_\_\_\_ .00

6. Other Credits: (See instructions (enclose additional sheets if necessary))

a. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ .00

b. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ .00

c. Enter credit name \_\_\_\_\_ code no. \_\_\_\_\_ .00

Important: Lines 4 through 6 added together cannot be greater than the state adjusted gross income tax due on Form IT-40, line 9 (see Combined Limitation instructions)

7. Add lines 1 through 6. Enter total here and on line 13 of Form IT-40 Total Offset Credits \_\_\_\_\_ .00

2015111002A

Total all your credits on your Schedule 6 form and enter that total in line 13 of your IT-40.

12. Enter credit from Schedule 6, line 12 (enclose schedule) \_\_\_\_\_ 12 \_\_\_\_\_ .00

13. Enter offset credits from Schedule 6, line 7 (enclose schedule) \_\_\_\_\_ 13 \_\_\_\_\_ .00

14. Add lines 12 and 13 \_\_\_\_\_ Indiana Credits 14 \_\_\_\_\_ .00

15. Enter amount from line 11 \_\_\_\_\_ Indiana Taxes 15 \_\_\_\_\_ .00

16. If line 14 is equal to or more than line 15, subtract line 15 from line 14 (if smaller, skip to line 23) 16 \_\_\_\_\_ .00

17. Amount from line 16 to be donated to the Indiana Nongame Wildlife Fund \_\_\_\_\_ 17 \_\_\_\_\_ .00

18. Subtract line 17 from line 16 \_\_\_\_\_ Overpayment 18 \_\_\_\_\_ .00

19. Amount from line 18 to be applied to your 2014 estimated tax account (see instructions on page 10).

Enter your county code \_\_\_\_\_ county tax to be applied \$ a \_\_\_\_\_ .00

Spouse's county code \_\_\_\_\_ county tax to be applied \$ b \_\_\_\_\_ .00

Indiana adjusted gross income tax to be applied \$ c \_\_\_\_\_ .00

Total to be applied to your estimated tax account (a + b + c; cannot be more than line 18) 19d \_\_\_\_\_ .00

20. Penalty for underpayment of estimated tax from Schedule IT-2210 or IT-2210A (enclose sch.) \_\_\_\_\_ 20 \_\_\_\_\_ .00

21. Refund: Line 18 minus lines 19d and 20. Note: If less than zero, see line 23 \_\_\_\_\_ Your Refund 21 \_\_\_\_\_ .00

22. Direct Deposit (see page 12)

# Claiming NAP Credits

Complete your IT-40, and ensure to include your Schedule 6 with your other documents when filing your Indiana state tax return.



# Claiming NAP Credits

For corporate donors, or donors who are filing electronically, please contact your tax professional, or the Indiana Department of Revenue at 317-232-2240 for further assistance in claiming your NAP credits.

For specific advice regarding claiming of Indiana Tax Credits, please contact:

Marcia Vare  
Supervisor for Individual Tax Administration  
Indiana Department of Revenue  
317-615-2538  
[mvare@dor.in.gov](mailto:mvare@dor.in.gov)

# Frequently Asked Questions

## NC-10/20 forms

According to the 2014-2015 Neighborhood Assistance Program Manual

*“Form NC-10 must be completed and retained by the participating organization in a physical or digital format. One (1) form is required per donor, per NAP cycle.”*

- NC-10 forms are not required to be submitted to the Department of Revenue.
- IHCD has been informed that the Department of Revenue will not be issuing NC-20 forms.

# Frequently Asked Questions

What is the difference between a Tax *Credit*, and a Tax *Deduction*?

A **tax deduction** reduces a taxpayer's taxable income.

A **tax credit** counts as if it were taxes already paid, and reduces the taxpayer's total tax liability.

*Example:*

Taxpayer income: \$40,000

Tax rate: 25%

Tax Liability:  $(40,000 \times .25) = \$10,000$

- A \$1,000 tax **deduction** would reduce the taxpayer's taxable income to \$39,000.

$$40,000 - 1,000 = 39,000$$

$$39,000 \times .25 = \underline{\$9,750}$$

- A \$1,000 tax **credit** would reduce the taxpayer's tax liability to \$9,000.

$$40,000 \times .25 = 10,000$$

$$10,000 - 1,000 = \underline{\$9,000}$$



Indiana Housing & Community Development Authority

# Frequently Asked Questions

## Last Minute Sales:

At the end of the year, many taxpayers are estimating their tax liability, and are interested in making NAP contributions.

NAP contributions for 2014 can be made up until 11:59 PM on December 31, 2014.

If a contributor wishes to make a last-minute purchase, and your organization has already submitted your report, contact the NAP Program Coordinator to re-open that report for additional entries.

# Frequently Asked Questions

## Re-Allocation of NAP Credits:

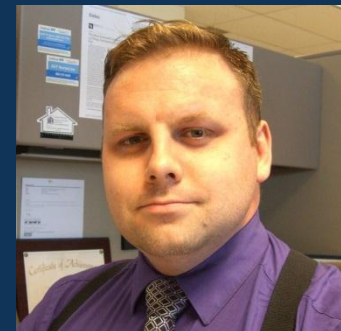
When NAP credits are de-allocated from an organization for any reason, those credits are re-allocated to other eligible organizations. In 2013, this process was performed through a similar formula as the initial award. This practice may or may not be continued in the future.

Organizations who have sold all of their credits expressed an interest in re-allocated credits have been recorded and will be included in the process should any credits become available.

If credits become available for re-allocation, organizations who have expressed an interest will be notified. Awards will be made at the end of the NAP cycle (typically in June.)

Re-allocated credits are subject to the same regulations as awarded credits.

# Thank you!



*\*A recording of this webinar will be available shortly on the IHCDa website at [www.IHCDA.in.gov](http://www.IHCDA.in.gov).*